

<b>DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION</b>	Attorney Docket Number	14223.5
	First Named Inventor	Ivan Melnyk
<b>COMPLETE IF KNOWN</b>		
<input type="checkbox"/> Declaration Submitted With Initial Filing <b>OR</b> <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Application Number	
	Filing Date	
	Group Art Unit	
	Examiner Name	

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

#### FIBER OPTIC FLOW SENSING DEVICE AND METHOD

*(Title of the Invention)*

the specification of which

Is attached hereto

OR

was filed on (MM/DD/YYYY) 02/25/2005 as United States Application Number or PCT International

Application Number: PCT/CAC2015/000001

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

## DECLARATION — Utility or Design Patent Application

I hereby appoint:

Practitioners associated with the Customer Number:

21999

**OR**

Practitioner(s) named below:

Name	Registration Number

as my attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Direct all correspondence to:

The address  
associated with  
Customer Number

21999

OR

Correspondence address below

**Name**

**Address**

**City**

**State**

**ZIP**

**Country**

**Telephone**

**Fax**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**NAME OF SOLE OR FIRST INVENTOR:**

A petition has been filed for this unsigned inventor

**Given Name**

(first and middle [if any])

Ivan

**Family Name or Surname**

Melnyk

**Inventor's Signature**

*J. Eller*

**Date**

*August 18, 2006*

**Residence: City**  
Coquitlam

**State**

**Country**  
Canada

**Citizenship**  
Canada

**Mailing Address** 604 Cottonwood Avenue

**City**  
Coquitlam

**State**

**Zip**  
V3J 2S4

**Country**  
Canada

**NAME OF SECOND INVENTOR:**

A petition has been filed for this unsigned inventor

**Given Name**

(first and middle [if any])

**Family Name or Surname**

**Inventor's Signature**

**Date**

**Residence: City**

**State**

**Country**

**Citizenship**

**Mailing Address**

**City**

**State**

**Zip**

**Country**

Additional inventors or a legal representative are being named on the \_\_\_\_\_ supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.